Many people, for instance, would attribute a distinctly religious intent to Dr. Parmelee in his desire to benefit his fellow-men.

Dr. Parmelee also speaks of the "hideous discrimination against bastards," and desires to wipe out completely the distinctions between legitimate and illegitimate birth. He forgets that these particular distinctions have been laboriously evolved in order to make paternity—at best always an inference—somewhat more easily recognised and its responsibilities more readily enforced. In the extreme case, nothing can do away with the distinction, whether the law recognises it formally or not, between a child whose father knows, acknowledges and cares for it and a child whose paternity is completely unknown, except a return to promiscuous sexual relationship and the descent of name and property through the mother, paternity being then an equally uncertain and negligible factor for everyone alike. Many people would feel such a state of affairs to involve a hideous want of discrimination.

The number of times the expression "it goes without saying"—at best an un-English construction—is used in this volume is really a quite uncomfortable feature of an excellent, interesting and fair-minded study of "Poverty and Social Progress."

C. D. W.

Bandler, Samuel Wyllis, M.D.; Professor of Gynæcology in the New York Post Graduate Medical School and Hospital. The Expectant Mother. Published by W. B. Saunders' Company, Philadelphia and London; 1916; pp. 211; price 6s. net.

This little book of 202 pages is more than a mere guide to the young mother amid the anxieties and dangers of pregnancy and parturition. It looks backward to the important years of adolescence and forward to the equally important period of convalescence and lactation. Dr. Bandler teaches with sympathy and with authority out of a mind and heart stored with knowledge and with practical experience.

Probably the expectant mothers of America will gladly avail them-

Probably the expectant mothers of America will gladly avail themselves of Dr. Bandler's guidance, and they will be wise in their choice of a guide. It is not likely that the book will command a market in England—the ground is well occupied and there is scarcely any demand for domestic instruction in mothercraft that is not sufficiently answered

by books already provided.

It is impossible for reviewer and author to see every detail from the same angle, and probably English authorities in general would dissent from Dr. Bandler's dictum that "patients should be examined every two weeks as soon as the existence of pregnancy is settled," and also from that in which he tells us "repeated examination during the final weeks is of importance, not only to show us that the head is presenting, but to show us the relation of the head to the bony inlet." If Dr. Bandler intends us to understand that external examination is desirable we agree with him, but from the context we fear that he means internal examination, and this we hold to be not merely undesirable but dangerous, because frequently repeated internal examinations are likely to result in the introduction of pathogenic germs into the birth canal.

On page 68 we are told that when the mother is in the pre-ectamptic state due to one or other of the toxemias of pregnancy labour should be induced and the pregnancy brought to an end. This advice may be good, but surely Dr. Bandler's remark "it is wiser to take measures before we are compelled to—then we are sure to save both mother and child" needs modification. The induction of premature labour may be necessary, but in too many instances the mother is too profoundly poisoned and the child too deeply involved and also too premature to survive. It is not possible

that Dr. Bandler means exactly what his words seem to imply.

We are glad to find that on the vexed question of "Twilight sleep" Dr. Bandler gives clear, decided, and, to our mind, sound advice. He tells us that although the injection of scopolamine and morphia abolishes

the memory of pain it does not abolish the pain itself, that the patient suffers much from thirst, that she is often so restless that she may need to be forcibly restrained by two or three assistants, that the duration of labour is usually prolonged, and the percentage of instrumental deliveries is increased. Further, the induction of "Twilight sleep" is not without subsequent discomfort and even risk to the mother, and is a distinct handicap to the infant, which is frequently born in a condition of suspended animation. In addition to all these evils, there is, as Dr. Bandler points out, a real necessity that the accoucheur should remain constantly in the patient's room and in vigilant attendance on her until the whole labour is accomplished.

Instead of the administration of scopolamine-morphine Dr. Bandler suggests the use of piturtrin, which, given at the right time and in cases presenting no mechanical difficulty, acts admirably in strengthening the action of the uterus and in producing pains which are more effectual but

not more painful than usual.

The chapter on Cæsarian Section is valuable and ought to further that education of the public which the author very properly considers necessary. He says: "The entire operation takes a very short space of time, and is in no wise a dangerous one if done when the physician wants to do it, and not when, after long hours of hopeless labour, he is compelled to do it." The italics are ours. These words indicate the exact truth, and tell us in one short sentence why Cæsarian Section came to be looked on as a desperate remedy. Before the days of aseptic surgery, when every wound was dangerous and the majority of abdominal wounds were fatal, surgeons shrank from removing the child through the abdominal wall and postponed the operation until the mother was already septic and moribund—no wonder that Cæsarian Section was looked on with horror!—but now it is an advisable operation and offers a good hope of safety to both mother and child. The public, however, have not yet learned this lesson and the reluctance of husband and wife frequently causes the postponement of the operation until the woman's condition has become hopeless.

On page 189 Dr. Bandler tells us that "modern culture and social conditions have an unfavourable influence on the sexual organs of women, which finds its expression in the great frequency of gynæcologic diseases." Taken by itself we should feel bound to dissent very earnestly from this dictum; but in reading further we find that the "culture and the social conditions" referred to are exactly the circumstances most inimical to the welfare of the young—improper books, plays, conversations, and friendships, and so, after all, our disagreement with our author resolves itself into a different value of the word "culture." The things which Dr. Bandler reprobates and yet calls "culture" are not

"culture" in our acceptation of the word.

The book closes with an eminently sane and interesting, but all too brief, chapter on eugenics, and one on the secretions of the ductless glands. This latter, if expanded, would be of great value to the student of midwifery and gynæcology, but is perhaps a little above the heads of the public for whom the book is intended.

We take our leave of Dr. Bandler with many thanks for his wise and interesting book; we are the better for having read it, and we wish it all good success.

MARY SCHARLIEB, M.D., M.S.

Walter, H. E. Genetics. An Introduction to the Study of Heredity. New York: The Macmillan Company; 1915; pp. 272.

THIS is a very good general introduction for students of eugenics. It is provided with an index and a short bibliography. The treatment is light and uncritical. Frequent citations, of very unequal merit, are made from modern American works. The ground covered is very extensive, including chapters on the chromosomes, variation, mutation, inheritance